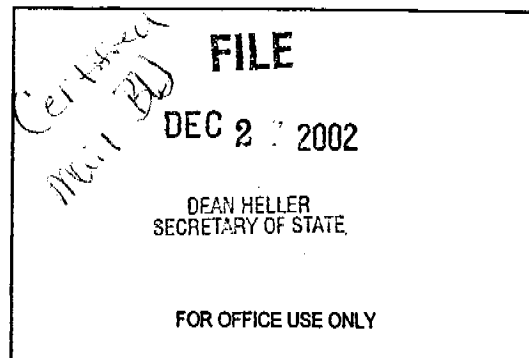


KEN SANTOR **NEVADA STATE TREASURER** **STATE**
 Name (print) Office (if applicable) District (if applicable)
2060 Del Rio Lane, Reno, NV 89509-3811 **775-322-1975 323-8516**
 Mailing Address (include city and zip code) Telephone No.
 E-Mail Address

Select Appropriate Box(es) ☒ CANDIDATE ☐ PAC ☐ BAG ☐ POL PARTY ☐ INTERP ☐ AMENDED

☒ **Report #3 — Due January 15, 2003**
 Period: Oct. 25, 2002 - Jan. 3, 2003
BAGs only Period: Oct. 25, 2002 - Dec. 5, 2002

**BEGINNING CASH ON HAND**

1. Cash on Hand at Beginning of This Reporting Period (October 25, 2002) -0-

CONTRIBUTIONS SUMMARY

2. Total Monetary Contributions Received This Period in Excess of \$100 -0-
 3. Total Monetary Contributions Received This Period of \$100 or Less -0-
 4. Actual Number of Monetary Contributions This Period of \$100 or Less -0-
 5. Interest and Income Earned This Period on Contributions -0-
 6. Total Amount of Monetary Contributions Received (Add Lines 2, 3 and 5) -0-
 7. SUBTOTAL (Add Lines 1 and 6) -0-
 8. Total Value of In Kind Contributions Received This Period -0-

EXPENSES SUMMARY

9. Total Monetary Expenses Paid This Period in Excess of \$100 -0-
 10. Total Expenses Contracted for This Period, But Not Paid, in Excess of \$100 -0-
 11. Total Monetary Expenses Paid This Period of \$100 or Less -0-
 12. Total Expenses Contracted for This Period, But Not Paid, of \$100 or Less -0-
 13. Expense for Filing Fee Paid This Period (Do not include in Line 9 or 11 Above) -0-
 14. Total Amount of All Monetary Expenses Paid (Add Lines 9, 11, and 13) -0-
 15. Total Value of In Kind Expenses This Period -0-

ENDING CASH ON HAND

16. Cash on Hand at Close of This Reporting Period (Subtract Line 14 from Line 7) -0-

AFFIRMATION

I Declare Under Penalty of Perjury That the Foregoing is True and Correct.

Signature *Ken Santor*

12/27/02

Date